

**Senate File 2165 - Introduced**

SENATE FILE 2165

BY SWEENEY

**A BILL FOR**

1 An Act relating to insurance coverage for prescription drugs  
2 used in the treatment of metastatic cancer and associated  
3 conditions, and including applicability provisions.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. NEW SECTION. 514C.24A Prescription drugs —  
2 metastatic cancer and associated conditions.

3 1. As used in this section, unless the context otherwise  
4 requires:

5 a. "*Associated conditions*" means symptoms or side effects  
6 associated with metastatic cancer, or with the health care  
7 services for metastatic cancer provided by a covered person's  
8 health care professional and which in the judgment of the  
9 covered person's health professional jeopardizes the health of  
10 the covered person.

11 b. "*Covered person*" means a policyholder, subscriber, or  
12 other person participating in a policy, contract, or plan that  
13 provides for third-party payment or prepayment of health or  
14 medical expenses that provides coverage for prescription drugs.

15 c. "*Health care professional*" means the same as defined in  
16 section 514J.102.

17 d. "*Health care services*" means services for the diagnosis,  
18 prevention, treatment, cure, or relief of a health condition,  
19 illness, injury, or disease.

20 e. "*Metastatic cancer*" means cancer that has spread from  
21 the primary or original site of the cancer to tissue, lymph  
22 nodes, or other parts of the body. Metastatic cancer may also  
23 be referred to as advanced cancer or stage 4 cancer.

24 f. "*Prescription cancer drug*" means a prescription drug that  
25 is used for the treatment of metastatic cancer or associated  
26 conditions.

27 g. "*Prescription drug*" means a prescription drug that has  
28 been prescribed as medically necessary by a covered person's  
29 health care professional.

30 h. "*Step therapy protocol*" means the same as defined in  
31 section 514F.7.

32 2. a. Notwithstanding the uniformity of treatment  
33 requirements of section 514C.6, a policy, contract, or plan  
34 providing for third-party payment or prepayment of health or  
35 medical expenses that provides coverage for prescription drugs

1 shall provide coverage for prescription cancer drugs.

2 *b.* Notwithstanding section 514F.7, the policy, contract, or  
3 plan shall provide coverage, without imposing a step therapy  
4 protocol, for a prescription cancer drug that meets all of the  
5 following requirements:

6 (1) The use of the prescription cancer drug is in accordance  
7 with the medical standards of care for metastatic cancer or  
8 associated conditions.

9 (2) The use of the prescription cancer drug for metastatic  
10 cancer and associated conditions is supported by peer-reviewed,  
11 evidence-based literature.

12 (3) The prescription cancer drug has been approved by the  
13 United States food and drug administration.

14 3. *a.* This section shall apply to the following classes of  
15 third-party payment provider contracts, policies, or plans:

16 (1) Individual or group accident and sickness insurance  
17 providing coverage on an expense-incurred basis.

18 (2) An individual or group hospital or medical service  
19 contract issued pursuant to chapter 509, 514, or 514A.

20 (3) An individual or group health maintenance organization  
21 contract regulated under chapter 514B.

22 (4) A plan established for public employees pursuant to  
23 chapter 509A.

24 *b.* This section shall not apply to accident-only, specified  
25 disease, short-term hospital or medical, hospital confinement  
26 indemnity, credit, dental, vision, Medicare supplement,  
27 long-term care, basic hospital and medical-surgical expense  
28 coverage as defined by the commissioner of insurance,  
29 disability income insurance coverage, coverage issued as a  
30 supplement to liability insurance, workers' compensation or  
31 similar insurance, or automobile medical payment insurance.

32 4. The commissioner of insurance may adopt rules pursuant to  
33 chapter 17A to administer this section.

34 Sec. 2. APPLICABILITY. This Act applies to third-party  
35 payment provider contracts, policies, or plans delivered,

1 issued for delivery, continued, or renewed in this state on or  
2 after January 1, 2023.

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EXPLANATION

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The inclusion of this explanation does not constitute agreement with

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the explanation's substance by the members of the general assembly.

6 This bill relates to insurance coverage for prescription  
7 drugs used in the treatment of metastatic cancer.

8 The bill requires policies, contracts, or plans providing  
9 for third-party payment or prepayment of health or medical  
10 expenses that provide coverage for prescription drugs to  
11 provide coverage for prescription cancer drugs. "Prescription  
12 cancer drug" is defined in the bill as a prescription drug that  
13 is used to treat metastatic cancer or associated conditions.  
14 "Metastatic cancer" is also defined in the bill.

15 The policy, contract, or plan is required to provide  
16 coverage, without imposing a step therapy protocol, for a  
17 prescription cancer drug that has been approved by the United  
18 States food and drug administration, the use of which is in  
19 accordance with medical standards of care for metastatic cancer  
20 and associated conditions, and the use of which is supported  
21 by peer-reviewed, evidence-based literature. "Associated  
22 conditions" is defined in the bill. "Step therapy protocol" is  
23 defined in the bill as a protocol or program that establishes a  
24 specific sequence in which prescription drugs for a specified  
25 medical condition and medically appropriate for a particular  
26 covered person are covered under a pharmacy or medical benefit  
27 by a health carrier, a health benefit plan, or a utilization  
28 review organization, including self-administered drugs and  
29 drugs administered by a health care professional.

30 The bill applies to the third-party payment providers  
31 enumerated in the bill. The bill specifies the types of  
32 specialized health-related insurance which are not subject to  
33 the coverage requirements of the bill.

34 The commissioner of insurance may adopt rules to administer  
35 the requirements of the bill.

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1 The provisions of the bill are applicable to third-party  
2 payment provider contracts, policies, or plans delivered,  
3 issued for delivery, continued, or renewed in this state on or  
4 after January 1, 2023.